

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS	104361	9/28
O.I.P.E. CLASSIFIER		59	10/11
FORMALITY REVIEW	LA	60390	11-16-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	10/10/00
2	✓	✓	10/10/00
3	✓	✓	10/10/00
4	✓	✓	10/10/00
5	✓	✓	10/10/00
6	✓	✓	10/10/00
7	✓	✓	10/10/00
8	✓	✓	10/10/00
9	✓	✓	10/10/00
10	✓	✓	10/10/00
11	✓	✓	10/10/00
12	✓	✓	10/10/00
13	✓	✓	10/10/00
14	✓	✓	10/10/00
15	✓	✓	10/10/00
16	✓	✓	10/10/00
17	✓	✓	10/10/00
18	✓	✓	10/10/00
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23	✓	✓	10/10/00
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25	✓	✓	10/10/00
26	✓	✓	10/10/00
27	✓	✓	10/10/00
28	✓	✓	10/10/00
29	✓	✓	10/10/00
30	✓	✓	10/10/00
31	✓	✓	10/10/00
32	✓	✓	10/10/00
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42	✓	✓	10/10/00
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44	✓	✓	10/10/00
45	✓	✓	10/10/00
46	✓	✓	10/10/00
47	✓	✓	10/10/00
48	✓	✓	10/10/00
49	✓	✓	10/10/00
50	✓	✓	10/10/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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Best Available Copy